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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

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Office Use Only

1.		IAME OF TYPE OR PRINT ▼ COMMITTEE (in full)				Example: If typing, type over the lines.						
[P.R. O. G.R.E.S.S. I.V.E. V. D.T.E.R.S. O.F. A.M.E.R.I.C.A.												
ADE	ORESS (n	umber and street)	[P.O. B.O.X. 8152									
Check if different than previously reported. (ACC)												
			BURLINGTON VT 0,54,02-									
2.	FEC ID	ENTIFICATION NU	UMBER ▼ CITY			STATE A				ZIP CODE A		
	Co	04065	53	3.	IS THIS REPORT	X	NEW (N) OR	() ()	AMENDED (A)			
4.	TYPE (Choose	OF REPORT One)	(b) Mor Rep	ort 🗐 ' On: 🚎	eb 20 (M2)	F3	May 20 (M5)	ريسيا	ug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)	
·	(a) Qua	rterly Reports:			/lar 20 (M3)		Jun 20 (M6)	∭ S	ep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)	
	,,	April 15 Quarterly Report (C			Apr 20 (M4)		Jul 20 (M7)		ct 20 (M10)		Jan 31 (YE)	
	(1 ₄ ,5) 550, 1		(C)	12-Day PRE-Election Report for the:		Primary (12	2P)	Gener	al (12G)		Runoff (12R)	
		July 15 Quarterly Report (C			: F7	Convention	(12C)	Specia	al (12S)	Esta 1		
	X	October 15 Quarterly Report (C	23)		إيكا]				
	7	January 31 Year-End Report (Y	(E)	Ele	ction on	M	۱ (مرمور)		<u> </u>	in the State o	f	
		July 31 Mid-Year Report (Non-electio Year Only) (MY)	n (d)	30-Day POST-Election	D	General (3	0G)	Runof	f (30R)		Special (30S)	
		Termination Report (TER)		Report for the	ction on	M	, <u> </u>	~~~ ~~~		in the State o	1	
5.	Covering	11 2	* ' •	1 20	ŏ 8	through		′ .3 δ	120	08		
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer F Philip Figure 1.												
Co C												
Signature of Treasurer Date 18 / 09 / 2008												
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.												
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